

Work Order ID 95636

January-16-13 8:31:36 AM

95636

Page 1

Item ID: D4002-5

Accept

N900040100

Setup Start

NS1

Revision ID:

Item Name: Hose Assembly

Stop

NS2

Start Date: 1/16/13 Start Qty: 5.00

5

Cust Item ID:

Required Date: 1/30/13 Req'd Qty: 5.00

5

Customer:

Reference:

Approvals: Process Plan: ML5

Date: 13-01-16 Tooling:

Date:

Run Start

NR1

QC:

Date: SPC (Y/N):

Date:

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
100		0.00							

100

Purchasing

Memo

Issue P/O: 158412

Purchase part as per Dwg D4002

Part #:156003-6D-0102

Possible Supplier: Aviall / API

Material release note required

pl 13-01-16

110

Receive & Inspect for Damage & Mat'l Certs

0.00

110

Packaging

Memo

0.00

Packaging

R. Hollas (S)

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data										
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										
FAULT CATEGORY										
Landing Gear				General						
<input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio						
				<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge						
				<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled						
				<input type="checkbox"/> Other						

Work Order ID 95636

January-16-13 8:31:36 AM

95636

Page 2

Item ID: D4002-5

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Hose Assembly

Stop

NS2

Start Date: 1/16/13 Start Qty: 5.00 *5*

Cust Item ID:

Required Date: 1/30/13 Req'd Qty: 5.00 *5*

Customer:

Reference:

Approvals:	Process Plan:	Date:	Tooling:	Date:	Run	Start	*NR1*
	QC:	Date:	SPC (Y/N):	Date:		Stop	*NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120 *120* QC Quality Control	QC6- Inspect dimensions to drawing Memo	0.00 15 9-89	SAS	13-122					S

130 *130* Packaging Packaging	Identify as per dwg & Stock Location Memo	0.00 194	0.00						
---	--	-----------------	------	--	--	--	--	--	--

140 *140* QC Quality Control	QC21- Final Inspection - Work Order Release Memo	0.00 0.00							
--	---	------------------	--	--	--	--	--	--	--

13/1/2013

13/1/2013

13/1/2013

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS																	
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>																
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>																
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																	
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector												
Doc/Data																							
Equip/Tooling																							
Operator																							
Material																							
Setup																							
Other																							
Process																							
Supplier																							
Training																							
Unapproved																							
FAULT CATEGORY																							
Landing Gear				General																			
<input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio								<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge				<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled		<input type="checkbox"/> Other	

Picklist Print

January-16-13 8:31:40 AM

Work Order ID: 95636

Parent Item: D4002-5

Parent Item Name: Hose Assembly

95636
D4002-5

Start Date: 1/16/13

Start Qty: 5.00

Required Date: 1/30/13

Required Qty: 5.00

Comments: IPP rev A 09.12.23 new Issue Prelim EC verified by: DD IPP rev B 10.05.13 ecn10-562 EC verified by:DD

NCR: Yes / No

DQA: _____ Date: _____

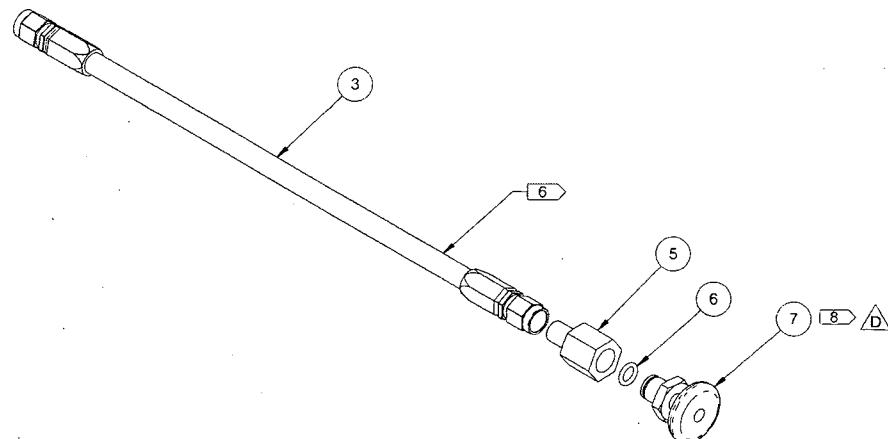
WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

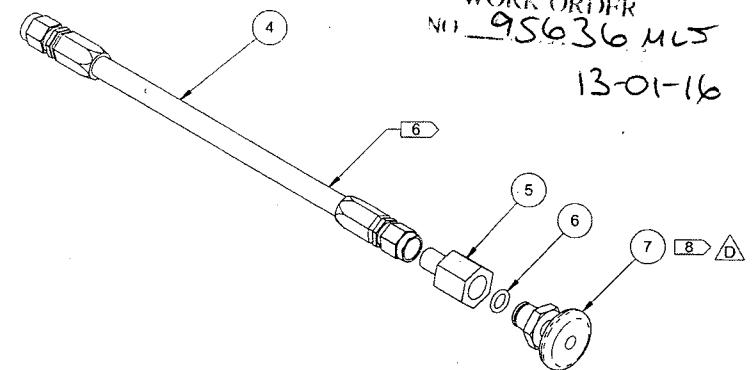
Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS					
Part No. _____	Work Order:	Part No. _____	Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
NCR No. _____	Part No. _____	NCR No. _____	Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data										
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										
FAULT CATEGORY										
Landing Gear				General						
				Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>		
				Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>		
				Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>		
				Crushed/Crimped <input type="checkbox"/>	Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>		
				Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>			
				Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>			
				Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>	Other <input type="checkbox"/>		
				Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>				
				Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>				
				Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>				
				Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>				

ITEM NO.	QTY. -041	QTY. -043	PART NUMBER	DESCRIPTION	JOHN CAMERON AVIATION PART NUMBER
1	X		D4002-041	AUX TANK DRAIN HOSE ASSEMBLY, FWD	JCA-M47-1-13
2		X	D4002-043	AUX TANK DRAIN HOSE ASSEMBLY, AFT	JCA-M47-1-16
3	1		D4002-1	HOSE ASSEMBLY	
4		1	D4002-3	HOSE ASSEMBLY	
5	1	1	AN894D4-3	FITTING	
6	1	1	MS29512-04	O RING	
7	1	1	CCB4320	FUEL DRAIN VALVE (MS29528-4)	

SHOP
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER
NO. 95636 MUS
13-01-16



D4002-041 DRAIN HOSE - FRONT



D4002-043 DRAIN HOSE - REAR

RELEASED
2011-11-16
JW

NOTES:

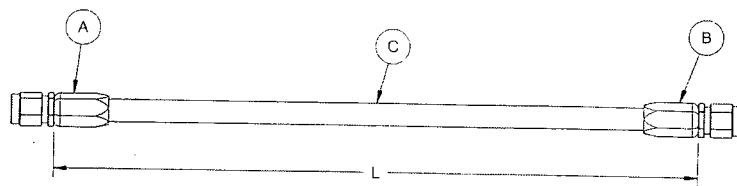
A 1) MATERIAL: N/A
2) FINISH: N/A
3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
4) UNITS: INCHES UNLESS OTHERWISE NOTED
5) BREAK SHARP EDGES: N/A
6) IDENTIFICATION: IDENTIFY WITH DART P/N AND B/N USING D2729-1 LABEL INSTALLED WITH D2182-045 HEAT SHRINK
7) WEIGHT: D4002-041 - 0.21 lbs
D4002-043 - 0.20 lbs
8) DRAIN VALVE MAY NOT APPEAR EXACTLY AS PICTURED

D	ADDED NOTE 8	DC	11.10.06
C	ADDED 8.00" TO D4002-1/-3 HOSES; AFFECTED WEIGHT	MB	11.09.14
B	CHANGE LENGTH MEASUREMENT FOR -3, ZN C2-2	HS	10.11.03
A	NEW ISSUE	HS	10.03.01
REV.	DESCRIPTION	BY	DATE
DESIGN	<i>AB</i>	DART AEROSPACE LTD	
DRAWN	<i>DC</i>	HAWKESBURY, ONTARIO, CANADA	
CHECKED	<i>EE</i>	DRAWING NO.	REV. D
MFG. APPR.	<i>EE</i>	D4002	SHEET 1 OF 2
APPROVED	<i>AB</i>	TITLE	SCALE
DE APPR.	<i>AB</i>	HOSE ASSEMBLY	NTS
DATE	11.10.06	COPYRIGHT © 2010 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

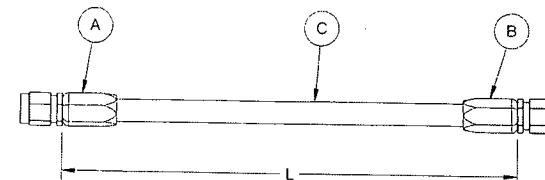
DART AEROSPACE PART NUMBER	JOHN CAMERON AVIATION PART NUMBER
D4002-1	REF JCA-M47-1-13
D4002-3	REF JCA-M47-1-16
D4002-5	JCA-M47-2-13
D4002-7	JCA-M47-2-25

SPECIFICATION CONTROL DRAWING

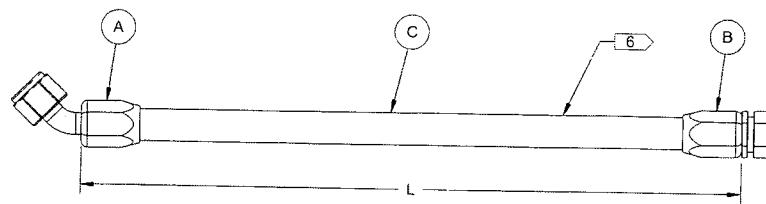
956036



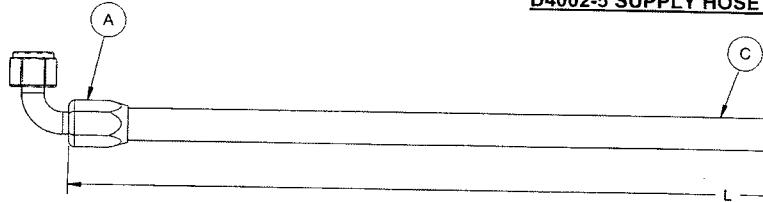
D4002-1 HOSE ASSEMBLY



D4002-3 HOSE ASSEMBLY



D4002-5 SUPPLY HOSE - FROM AUX TANK



D4002-7 SUPPLY HOSE - PUMP TO MAIN TANK FILLER NECK

DART PART NUMBER	STRATOFLEX PART NUMBER	POSSIBLE VENDOR	LENGTH "L"	END FITTING "A"	END FITTING "B"	HOSE "C"	WEIGHT
D4002-1	156001-3S-0185	AVIALL/API	17.90	676-3S	676-3S	156-3	0.16 lbs
D4002-3	156001-3S-0154	AVIALL/API	14.76	676-3S	676-3S	156-3	0.15 lbs
D4002-5	156003-6D-0102	AVIALL/API	8.94	678-6D	676-6D	156-6	0.13 lbs
D4002-7	156005-6D-0213	AVIALL/API	20.31	680-6D	676-6D	156-6	0.19 lbs

A NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N AND B/N USING D2729-1 LABEL INSTALLED WITH D2182-045 HEAT SHRINK
- 7) WEIGHT: SEE TABLE

RELEASED
2011-11-16

DESIGN	<i>BS</i>	DART AEROSPACE LTD	
DRAWN	<i>BC</i>	HAWKESBURY, ONTARIO, CANADA	
CHECKED	<i>BS</i>	DRAWING NO.	REV. D
MFG. APPR.	<i>BC</i>	D4002	SHEET 2 OF 2
APPROVED	<i>BS</i>	TITLE	SCALE
DE APPR.	<i>BS</i>	HOSE ASSEMBLY	NTS
DATE	11.10.06	COPYRIGHT © 2010 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD	

8 1 7 6 5 4 3 2 1

A

1



INVOICE



CUSTOMER P.O.: 18842

ORDER NUMBER: 0013089498-

77118

SHIPMENT NBR:

77118

PAGE: 1
DATE: 01/18/13
TIME: 20:43
EMP#: 22611

ORD TYP: RG
CURRENCY: USD

ORDER DATE: 01/16/13

B 032028
I DART AEROSPACE LTD
L 1270 ABERDEEN STREET
T HAWKESBURY ON K6A 1K7
O CANADA

S
H DART AEROSPACE LTD
P 1270 ABERDEEN STREET
T HAWKESBURY ON K6A 1K7
O CANADA

S 41270
H AVIALL DALLAS HOSE SHOP
P AVIALL
F HOSE SHOP
R 2755 REGENT BLVD
O DFW AIRPORT TX 75261-9048
M U.S.A.

LINE	MFG	ITEM	ORDER	SHIP	BACK ORDER	UOM	UNIT PRICE	EXTENDED UNIT PRICE
		DESCRIPTION	QUANTITY	QUANTITY				

PLEASE SHIP FEDEX P1 ON CUSTOMER ACCOUNT
NUMBER 1517-9324-0, AWB# MUST REFERENCE
THE PURCHASE ORDER NUMBER, SHIP TO THE
ATTN OF CHANTAL 613-632-9577

1	1S	156001-3S0185 HOSE: MED PRESSURE, RUBBER REIN ST, REF: Schedule B: 4009.22.0050	6	6	0 EA	106.50	639.00
		LOT 51249055 EA Country of Origin: U.S.A.		6			
2	1S	156003-6D0102 HOSE: MED PRESSURE, RUBBER REIN ST, REF: Schedule B: 4009.22.0050	5	5	0 EA	115.02	575.10
		LOT 51249061 EA Country of Origin: U.S.A.		5			
3	1S	156005-6D0213 HOSE: MED PRESSURE, RUBBER REIN ST, REF: Schedule B: 4009.22.0050	4	4	0 EA	128.13	512.52
				4			

It is hereby certified that AviAll Services, Inc., is an approved distributor and meets all requirements of ISO9001, AS9100, AS9120 and AC 00-56 at 2750 Regent Blvd. DFW Airport, Texas. The products, articles or parts referenced on this document are in new or overhauled condition and were purchased from an approved source (FAA, EASA, TCCA, Mil Spec or Commercial). The Original Manufacturers' Certifications are maintained on file at our central office location, and copies are available upon request or at AviAll.com. For overhauled or repaired products, articles or parts, the original FAA 8130-3 / EASA Form 1 (Return to Service) or Yellow Tag, from the FAA/JAA/EASA approved Air Agency are attached to the component.

CERTIFICATE OF CONFORMANCE

DISCOUNT TERMS APPLY ONLY TO SUB TOTAL. ALL RETURNED MERCHANDISE SUBJECT TO HANDLING FEE.

THIS IS TO CERTIFY THAT AVIALL HAS COMPLIED WITH THE PROVISIONS OF THE FAIR LABOR STANDARDS ACT OF 1938 AMENDED.

CUSTOMER ORIGINAL



INVOICE



PAGE: 2
 DATE: 01/18/13
 TIME: 20:43
 EMP#: 22611
 ORD TYP: RG
 CURRENCY: USD

CUSTOMER P.O.: 18842

ORDER NUMBER: 0013089498- 77118
 ORDER DATE: 01/16/13

B 032028
 I DART AEROSPACE LTD
 L 1270 ABERDEEN STREET
 T HAWKESBURY ON K6A 1K7
 O CANADA

S H DART AEROSPACE LTD
 H P 1270 ABERDEEN STREET
 P T HAWKESBURY ON K6A 1K7
 O O CANADA

SHIPMENT NBR: 77118

SHIP VIA: FED EX - COLLECT

S 41270
 H AVIALL DALLAS HOSE SHOP
 I AVIALL
 P HOSE SHOP
 R 2755 REGENT BLVD
 O DFW AIRPORT TX 75261-9048
 M U.S.A.

LINE	MFG	ITEM DESCRIPTION	ORDER QUANTITY	SHIP QUANTITY	BACK ORDER	UOM	UNIT PRICE	EXTENDED UNIT PRICE
		LOT 51249062 EA Country of Origin: U.S.A.		4				

*** These commodities, technologies, or software were exported from the United States in accordance with the Export Administration Regulations. Diversion contrary to U.S Law is prohibited.

AviAll is not providing OEM parts. AviAll is an authorized Stratoflex distributor providing TSO assemblies. Numbers referenced per customer requirements are for customer reference ONLY and are in no way intended to be represented as OEM parts. Any reference to an OEM part number does not authorize or reflect installation authority for this part. The installation authority is provided by the mechanic installing this product in accordance with FAR Part 43.

PARTS TOTAL	1,726.62
TAXES	0.00
FREIGHT	0.00
FUEL SURCHARGE	0.00
TOTAL	1,726.62

Currency: United States Dollar

CERTIFICATE OF CONFORMANCE
 It is hereby certified that AviAll Services, Inc., is an approved distributor and meets all requirements of ISO9001, AS9100, AS9120 and AC 00-56 at 2750 Regent Blvd. DFW Airport, Texas. The products, articles or parts referenced on this document are in new or overhauled condition and were purchased from an approved source (FAA, EASA, TCCA, Mil Spec or Commercial). The Original Manufacturers' Certifications are maintained on file at our central office location, and copies are available upon request or at AviAll.com. For overhauled or repaired products, articles or parts, the original FAA 8130-3 / EASA Form 1 (Return to Service) or Yellow Tag, from the FAA/JAA/EASA approved Air Agency are attached to the component.

JR Hofmann, Director, Quality Assurance & Training

DISCOUNT TERMS APPLY ONLY TO SUB TOTAL. ALL RETURNED MERCHANDISE SUBJECT TO HANDLING FEE.
 THIS IS TO CERTIFY THAT AVIALL HAS COMPLIED WITH THE PROVISIONS OF THE FAIR LABOR STANDARDS ACT OF 1938 AMENDED.

CUSTOMER ORIGINAL



Hose Shop 2755 Regent Blvd. DFW Airport

75261

Phone 972-586-1380 Fax 972-586-1381 www.aviall.com

TSO CERTIFICATION

It is hereby certified that (A) The parts and/or materials reflected herein were produced under Federal Aviation Administration approved manufacturing and quality control system/methods as set forth in the FAA issued technical standard order authorizations (TSOA) issued to Stratoflex and (B) such part and/or materials are new and are in condition for safe operation.

AviAll Order Number: 13089498

1. 156001-3S0185 6EA.
2. 156003-6D0102 5EA.
3. 156005-6D0213 4EA.

Signed:  Date: 1-17-13

"AviAll is not providing OEM parts. AviAll is an authorized Stratoflex distributor providing TSO assemblies. Numbers referenced per customer requirements are for customer reference ONLY and are in no way intended to be represented as OEM parts. Any reference to an OEM part number does not authorize or reflect installation authority for this part. The installation authority is provided by the mechanic installing this product in accordance with FAR Part 43".

If applicable, satisfactory compliance with the conditions and tests required for TSO approval indicates the hose assembly has met the minimum performance standards as stated in the TSO. Furthermore, it is the responsibility of the installer to determine the installation eligibility and that it will not cause the hose assembly to be subjected to conditions in excess of those for which it has been approved.

FORM# CERT -001